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SERIAL NUMBER 10/672,278	FILING OR 371(c) DATE 09/29/2003 RULE 1.47	CLASS 435	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. 40923-0134US1
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APPLICANTS

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**** CONTINUING DATA *******

This appln claims benefit of 60/414,341 09/30/2002

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****
**** 12/22/2003**

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY NJ	SHEETS DRAWING 10	TOTAL CLAIMS 106	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

35657

TITLE

Chimeric, human and humanized anti-granulocyte antibodies and methods of use

FILING FEE RECEIVED 1267	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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